

GOVERNMENT OF ANDHRA PRADESH

ABSTRACT

ESTABLISHMENT - SOCIAL WELFARE DEPARTMENT – A.P. State Employees Group Insurance Scheme - Late G. Venkata Ramana, Office Subordinate, S.W.Dept - Expired on 08.09.2007 - Rs.15,000/- (Rupees fifteen thousand only) towards payment of Insurance Fund, - Orders - Issued.

= = = = =

SOCIAL WELFARE (OP.II) DEPARTMENT

G.O.Rt.No. 44

Dated:11.01 2010.

Read the following:-

1. G.O.Ms.No.293, Fin. & Plg.(FW) Dept., dt.8.10.1984.
2. G.O.Ms.No.312, Fin. & Plg.(FW.Acc.II) Dept., dt.6.11.1984.
3. G.O.Ms.No.367, Fin. & Plg.(FW.Acc.II) Dept., dt.15.11.1994.
4. Cir.Memo.No.1749-B/28/A2/Admn.II/96,Fin & Plg.(FW) Dept., dt.24.2.1996.
5. Govt.Memo.No.34520/Admn.II/A2/99, Fin. & Plg.(FW) Dept., dt.18.11.1999.
6. G.O.(P)No.101 Fin (Admn.II) Dept dated 31.3.2009
7. From Smt. G. Rajya Lakshmi, W/o Late Sri G. Venkata Ramana, Office Subordinate, Social Welfare Department, application dated Nil.

**** ** ***

ORDER:-

Under rule-10 of the rules governing the A.P. State Employees Group Insurance Scheme, 1984 issued in the Government Order first read above, sanction is hereby accorded for refund of Insurance Fund, for Rs 15,000/- (Rupees fifteen thousand only) to Late G. Venkata Ramana, Office Subordinate, Social Welfare Department who was expired on 08.9.2007 while in service and who was a member of the A.P. State Employees Group Insurance Scheme, 1984.

2. The amount sanctioned in para-1 above shall be debited to the following Head of Account “8011-Insurance & Pension Funds MH.107-A.P.State Government Employees Group Insurance Scheme SH.(01)-Group Insurance Scheme 002-Savings Fund (Disbursement)003-Interest on Savings Fund”.

3. The Legal Heirs of the deceased Government Servant is informed that the amount now sanctioned, if found to be in excess of the eligibility, they will be called upon to remit such excess amount whenever it comes to light.

4. The Social Welfare (Claims) Department are requested to draw and disburse the amount sanctioned in para-1 above to Smt. G. Rajya Lakshmi, W/o Late Sri G. Venkata Ramana, Office Subordinate. Social Welfare Department.

(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA PRADESH)

**SHALINI
DEPUTY SECRETARY TO GOVERNMENT**

To

Smt. G. Rajya Lakshmi, W/o Late Sri G. Venkata Ramana, Office Subordinate
D-31, B-Blocks, Malakpet, Hyderabad.

The Social Welfare (Claims) Department.

The Pay & Accounts Officer, Sectt.Br., Hyderabad.

The Director of Insurance, Andhra Pradesh, Hyderabad.

The Director of State Audit, Andhra Pradesh, Hyderabad.

Copy to:-The Pay and Accounts Officer, Abids, Andhra Pradesh, Hyderabad.

//FORWARDED BY ORDER//

SECTION OFFICER